ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, Address, Telephone No.)		FOR COURT USE ONLY
ATTO	RNEY FOR (Name): Bar No:	
JUSTI STRE P.O. B	ERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE CE CENTER: Central Harbor North South West ET ADDRESS: GOX: AND ZIP CODE:	
PLAIN	TIFF:	
DEFE	NDANT:	
	SMALL CLAIMS AUTHORIZATION TO APPEAR	CASE NUMBER:
I am appearing on behalf of the:   Plaintiff   Defendant		
Name	: Title/relationship:	
Check	one box:	
	I am appearing as a representative on behalf of <b>a corporation</b> . I am an employee, officer or director of the corporation. I am employed, appointed or elected for purposes other than solely representing the corporation in small claims court.	
	I am appearing on behalf of a party who is <b>not a corporation</b> or a natural person (e.g. partnership or DBA). I will appear and participate. I am a regularly employed person, or a duly appointed or elected officer or director or in the case of a partnership, a partner, engaged for purposes other than solely representing the party in small claims court.	
	I am appearing as a representative on behalf of an individual doing business as <b>a sole proprietorship</b> . The claim can be proved or disputed by evidence of a account that constitutes a business record as defined in Section 1271 of the Evidence Code and there is no other issue of fact in the case. I am a regular employee for purposes other than solely representing the party in small claims actions and qualified to testify to the identity and mode of preparation of the business record.	
	I am appearing on behalf of a plaintiff who is serving on active duty in the <b>United States Armed Forces</b> outside this state, and was assigned to the duty station after the claim arose and the assignment is for more than six months; or a party is <b>incarcerated</b> in a county jail, a Department of Corrections facility, or a Youth Authority facility; or appearing for a defendant who is a <b>nonresident owner of real property</b> . I am serving without compensation. I have appeared in small claims actions on behalf of others no more than four times during the calendar year.	
	I am appearing on behalf of <b>my spouse</b> . The claim is a joint claim and the represented spouse has given their consent.	
I herek	by declare under penalty of perjury under the laws of the State of Californi	a that the foregoing is true and correct.
Date:		
DDIN'T (	DR TYPE NAME	SIGNATURE OF DECLARANT
LVIIVI (	JN TIFE NAME	SIGNATURE OF DECLARANT

1069 (R 7/99) CCP 116.540